NOV 3 0 2000

510(k) SUMMARY OF SAFETY AND EFFECTIVENESS

This summary of 510(k) safety and effectiveness information is being submitted in accordance with the requirements of the Safe Medical Devices Act (SMDA) of 1990 and 21 CFR 807.92. All data included in this document are accurate and complete to the best of KSEA's knowledge.

Applicant: Karl Storz Endoscopy - America, Inc.

600 Corporate Pointe Culver City, CA 90230

(310) 558-1500

Contact: Kevin Kennan

Regulatory Affairs Specialist

Device Identification: Common Name

Hysteroscopic insufflator

Trade Name

Karl Storz Hysteromat II

<u>Indication:</u> The Karl Storz model 203020 20 Equimat system is indicated for liquid distension of the uterus for performing diagnostic and therapeutic procedures, and monitoring the volume of irrigation fluid flowing into and out of the uterus.

<u>Device Description:</u> The Karl Storz model Hysteromat II is a microprocessor controlled pump/monitoring device designed to distend the uterus and monitor the volume of irrigation fluid flowing into and out of the uterus during hysteroscopic procedures.

<u>Substantial Equivalence</u>: The Karl Storz Hysteromat II system is substantially equivalent to the predicate devices since the basic features, design and intended uses are similar. The minor differences between the Karl Storz Hysteromat Ii and the predicate devices raise no new issues of safety and effectiveness, as these differences have no effect on the performance, function or intended use of these devices.

Signed: _

Senior Regulatory Affairs Specialist





NOV 3 0 2000

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Mr. Kevin Kennan Senior Regulatory Affairs Specialist Karl Storz Endoscopy – America, Inc. 600 Corporate Pointe CULVER CITY CA 90230 Re: K000806

Karl Storz Hysteromat II Dated: September 21, 2000 Received: September 22, 2000

Regulatory Class: II

21 CFR §884.1700/Procode: 85 HIG

Dear Mr. Kennan:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Current Good Manufacturing Practice requirements, as set forth in the Quality System Regulation (QS) for Medical Devices: General regulation (21 CFR Part 820) and that, through periodic QS inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4639. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsma/dsmamain.html".

Sincerely yours

Daniel G. Schultz, M.D.

Captain, USPHS

Acting Director, Division of Reproductive, Abdominal, and Radiological Devices

Office of Device Evaluation

Center for Devices and Radiological Health



510(k) Number (if known): 600806

Device Name: Karl Storz Hysteromat II

<u>Indications for Use</u>: The Karl Storz Hysteromat II is indicated for liquid distension of the uterus for performing diagnostic and therapeutic procedures, and monitoring the volume of irrigation fluid flowing into and out of the uterus.

(PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAG	řΕ
IF NEEDED)	

Concurrence of CDRH, Office of Device Evaluation (ODE)

Prescription Use:	X	OR Over-The-Counter Use:
(Per 21 CFR 801.109)	,	
		(Optional Format 1-2-96)

(Division Sign-Off) (

Division of Reproductive, Abdominal, ENT,

and Radiological Devices

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